In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to 26 U.S.C. Section 3402. The individual's social security number will be used for tax reporting and as an identification number.

# NDPERS • PO Box 1657 • Bismarck, • North Dakota 58502-1657 (701) 328- 3900 • 1-800-803-7377 • Fax 701-328-3920

PART A MEMBER INFORMATION				
Name (Last, First, Mi)		Social Security Number		
Address		Home Telephone Number		
City		State		Zip Code + 4
PART B NOTICE OF TERMINATION OF NDPERS MEMBERSHIP				
Agency Name	Department Nu		mber Membership Termination Date	
CERTIFIED CORRECT BY AUTHORIZED AGENT  Signature of Authorized Agent  Date of Signature				
ART C NOTICE TO EMPLOYEE				
To be considered eligible for a TRANSFER of both employer and employee contributions made on your behalf from NDPERS to TIAA-CREF, you must have at least three years of credited service between NDPERS and the ND Board of Higher Education (TIAA-CREF). You also must be employed in an eligible position with the ND Board of Higher Education at the time of the transfer. If you are not eligible at this time you may leave your account with NDPERS until you have accumulated three years of service between the two funds or terminate employment.  By taking a transfer, you will forfeit all your rights to benefits provided under NDCC Chapter 54-52, which include retirement or disability benefits, as well as service credit for retirement and dual membership purposes.  If you take a transfer and you return to NDPERS covered employment, you will begin accruing benefits as though you never participated in NDPERS before.				
PART D PAYMENT ELECTION				
Please Check One:  I meet the three year service credit and wish to transfer my account to TIAA-CREF.  My basic 401 (a) Qualified Retirement Annuity Contract Number is:  I wish to leave my account intact for later transfer or receipt of a distribution.				
Signature of Member		Date of Signature		

FILING PROCEDURE: Original to NDPERS – Please retain a photocopy for your records.

## NOTICE OF MEMBERSHIP TRANSFER TO TIAA-CREF

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## PART A: MEMBER INFORMATION

## TO BE COMPLETED BY THE AUTHORIZED AGENT

1-3. Enter all employee information as requested.

#### PART B: NOTICE OF TERMINATION OF NDPERS MEMBERSHIP

## TO BE COMPLETED BY THE AUTHORIZED AGENT

- 1. Enter the agency name and the department number assigned by NDPERS.
- 2. The "Membership Termination Date" is the **FIRST** day the employee's membership with TIAA-CREF was effective.
- 3. The authorized agent must certify the information in PARTS A and B by signing and dating the form in the space provided below Part B.

#### PART C: NOTICE TO EMPLOYEE

The employee **MUST** read this entire section prior to making an election.

## PART D: PAYMENT ELECTION

## TO BE COMPLETED BY THE EMPLOYEE

- 1. The employee checks this box to have the NDPERS account transferred over to TIAA-CREF, indicates his or her basic 401 (a) qualified retirement contract number with TIAA-CREF and signs and dates in the space provided at the bottom of Part D.
  - Funds transferred will not be taxed in the current year and no income tax will be withheld.
  - Funds will be directly transferred to TIAA-CREF within six (6) months of receiving the application package (ND Administrative Code Chapter 71-02-08-04).
  - The employee will be notified when the transfer is made.
- 2. The employee checks this box to leave the account intact for transfer at a future date or receipt of a distribution and signs and dates in the space provided at the bottom of Part D.
  - The account remains tax sheltered.
  - The account continues to accrue interest at the rate established by the NDPERS board.